UNITED STATES SECURITIES AND EXCHANGE COMMISSIONECEIVE Washington, D.C. 20549 FORM D

OMB APPROVAL OMB Number: 3235-0076' May 31, 2002 Expires: Estimated average burden hours per form.....

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY Prefix Serial DATE RECEIVED

Brief Description of Business  Mortgage Loans  Type of Business Organization [x] corporation [] limited partnership, already formed [] other (please specify).  [] business trust [] limited partnership, to be formed  Actual or Estimated Date of Incorporation or Organization [X] Actual [] Estimated  Jurisdiction of Incorporation or Organization Nevada 07/26/96  GENERAL INSTRUCTIONS Federal:	RIME RATE INVESTORS,	INC.		e.) 11768.	
A. BASIC IDENTIFICATION DATA  I. Enter the information requested about the issuer Name of Issuer ([]] check if this is an amendment and name has changed, and indicate change.)  PRIME RATE INVESTORS, INC.  Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)  1559 SW 107th Avenue, Suite A, Miami, Florida 33174  Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number if different from Executive Offices)  In/a  Brief Description of Business  Mortgage Loans  THO  Type of Business Organization  I limited partnership, already formed    Dusiness trust	ng Under (Check box(es) that apply):	[X] Rule 504 [ ] Rule 505	[ ] <u>Rule 506</u>	[] Section 4(6)	[x] ULOE
Enter the information requested about the issuer ame of Issuer (	e of Filing: [x] New Filing [] Amo	endment			
ame of Issuer ( [ ] check if this is an amendment and name has changed, and indicate change.)  PRIME RATE INVESTORS, INC.  ddress of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 559 SW 107th Avenue, Suite A, Miami, Florida 33174  ddress of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number of different from Executive Offices)  Invariant Inverse Invariant Inverse Inv		A. BASIC IDENTIFICATION	DATA		
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f different from Executive Offices)  n/a  rief Description of Business  Iortgage Loans  Iortgage Loans  ype of Business Organization   corporation	59 SW 107 <sup>th</sup> Avenue, Suite A, Mi	iami, Florida 33174			
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ype of Business Organization  [] corporation  [] limited partnership, already formed  [] other (please specify).  [] limited partnership, to be formed  ctual or Estimated Date of Incorporation or Organization  ctual or Estimated Date of Incorporation or Organization  [X] Actual  [] Estimated  Actual O7/26/96  ENERAL INSTRUCTIONS  ENERAL INSTRUCTIONS	(December) (December )				ROCES!
corporation   [] limited partnership, already formed   [] other (please specify).	f Description of Business		`		
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	rtgage Loans e of Business Organization corporation [] li usiness trust [] li ual or Estimated Date of Incorporatios diction of Incorporation or Organiza	imited partnership, to be forme on or Organization [X]	Actual []Estir		JUL 0 3 20
ho Must File: All issuers making an offering of securities in reliance on an exemption under <u>Regulation D</u> or Section 4(6), 17 ( 0.501 et seg. or 15 U.S.C. 77d(6)	rtgage Loans  e of Business Organization corporation [] li usiness trust [] li ual or Estimated Date of Incorporation or Organization of Incorporation of Incorporat	imited partnership, to be forme on or Organization [X] ation Nevada	Actual [ ] Estii 07/26/96	mated	JUL 0 3 20 THOMSO EINANCIA
then to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed file	rtgage Loans  e of Business Organization corporation [] li usiness trust [] li ual or Estimated Date of Incorporation sdiction of Incorporation or Organization IERAL INSTRUCTIONS eral: Must File: All issuers making an offering	imited partnership, to be forme on or Organization [X] ation Nevada	Actual [ ] Estii 07/26/96	mated	JUL, 0 3 20 THOMSO EINANCIA
ith the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address givelow or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or	rtgage Loans  e of Business Organization corporation [] li usiness trust [] li ual or Estimated Date of Incorporation sciiction of Incorporation or Organization ERAL INSTRUCTIONS eral: Must File: All issuers making an offering 501 et seq. or 15 U.S.C. 77d(6) en to File: A notice must be filed no later	imited partnership, to be forme on or Organization [X] Alation Nevada  g of securities in reliance on an extended than 15 days after the first sale of	Actual [ ] Estin 07/26/96  emption under Regressecurities in the off	mated  ulation D or Section 4 fering. A notice is dee	JUL, 0 3 20 THOMSC FINANCIA (6), 17 CFR

certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA		
<ol> <li>Enter the information requested for the following:         <ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five y</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or di a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general a partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul> </li> </ol>	isposition of	
Check Box(es) that Apply: [ ] Promoter [X ] Beneficial Owner [X ] Executive Officer [X	( ]Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) FERNANDEZ, CARLOS		
Business or Residence Address (Number and Street, City, State, Zip Code) 1559 SW 107 <sup>th</sup> Avenue, Suite A, Miami, Florida 33174		
Check Box(es) that Apply: [ ] Promoter [ x ]Beneficial Owner [x] Executive Officer [x	] Director	[ ]General and/or Managing Partner
Full Name (Last name first, if individual) FERNANDEZ, LOURDES		-
Business or Residence Address (Number and Street, City, State, Zip Code) 1559 SW 107 <sup>th</sup> Avenue, Suite A, Miami, Florida 33174		
Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [] Executive Officer [] Dir	rector []	General and/or Managing Partner
Full Name (Last name first, if individual) ASTROM, CHRISTOPHER		
Business or Residence Address (Number and Street, City, State, Zip Code) 6915 Red Road, Suite 222, Coral Gables, Florida 33143		
Check Box(es) that Apply: [ Promoter [ ] Beneficial Owner [ Executive Officer [ ] D	Director []	General and/or Managing Partner
Full Name (Last name first, if individual)	-	
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ Executive Officer [ ] D	Director []	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		-

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

		<u> </u>		B INF	ORMAT	ION AR	OUT OF	FERING				
1 Has	the issue	er sold o	r does the	<del>,</del>							Yes N	 No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							•		<b>X</b> ]			
Ans	wer also	in Append	dix, Colun	nn 2, if fili	ing under	ULOE.						
2. What is the minimum investment that will be accepted from any individual?								\$ 15,00				
3. Doe	es the offe	ering pern	nit joint ov	vnership	of a singl	e unit?		•••••			Yes N [ X ]	10 ]
indi sale broke or dea	rectly, any s of secur r or deale ler. If mor	y commise rities in the er register	sion or sir e offering ed with the re (5) per	nilar remi . If a pers le SEC al sons to b	uneration son to be nd/or with e listed a	for solicit listed is a a state o re associa	ation of po in associa ir states, l ated pers	be paid ourchasers ated personst the na ons of su	in conne on or age me of the	ction with nt of a broker		
Full Na N/A	me (Last r	ame first,	if individua	1)								
Busine	ss or Resid	dence Add	ress (Num	ber and St	reet, City,	State, Zip	Code)					
Name o	of Associat	ed Broker	or Dealer									
		Person L					cit Purcha	asers			[] All Sta	tes
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Last n	ame first, i	f individua	))								
Busines	s or Resider	nce Address	(Number a	nd Street, C	City, State, 2	Lip Code)						
Name of	f Associated	Broker or	Dealer						****			
States	in Which	Person L	isted Has	Solicited	i or Inten	ds to Soli	cit Purcha	asers				
(Check	c "All Sta	tes" or ch	eck indiv	idual Sta	tes)						[] All Sta	ites
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

<ol> <li>Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [ ] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.</li> </ol>				
Type of Security		Aggregate Offering Price	Α	mount Already. Sold
Debt	\$	-0-	\$	-0-
Equity	\$	100,000	\$	-0-
[X]Common []Preferred				
Convertible Securities (including warrants)	\$		\$	-0-
Partnership Interests	\$	-0-	\$	-0-
Other (Specify).	\$	-0-	\$	-0-
Total	\$_	100,000	_ \$_	-0-
Answer also in Appendix, Column 3, if filing under ULOE.				
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases.  For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines.  Enter "0" if answer is "none" or "zero."				
	Νι	umber Investors		Aggregate Oollar Amount of Purchases
Accredited Investors			\$	
Non-accredited Investors			\$	
Total (for filings under Rule 504 only)	_	-0-	<u>\$</u>	-0-
Answer also in Appendix, Column 4, if filing under ULOE.				
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
Time of offering	Ту	pe of Security	D	ollar Amount
Type of offering Rule 505	•		\$	Sold -0-
Regulation A	_		- <b>\$</b> _	
Rule 504	_		\$	-0-
Total	_		_ \$	-0-
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
Transfer Agent's Fees		[]\$		
Printing and Engraving Costs				
Legal Fees			2,	<u>500.00</u>
Accounting Fees				
Engineering Fees				<del> </del>
Sales Commissions (specify finders' fees separately)	• • • • •	[ ] \$ [ <b>x</b> ]\$		500.00
Total		[x]\$ [x]\$		000.00

b. Enter the difference between the aggregate offering price given in reto Part C - Question 1 and total expenses furnished in response to Pa Question 4.a. This difference is the "adjusted gross proceeds to the is	rt C- s	97,000
5. Indicate below the amount of the adjusted gross proceeds to the issuer us or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.		
	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees	[]\$	[]\$
Purchase of real estate	[]\$	_ []\$
Purchase, rental or leasing and installation of machinery and equipment	[] \$	[]\$
Construction or leasing of plant buildings and facilities	[]\$	[]\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[] \$	. [ ]\$
Repayment of indebtedness	[]\$	. []\$
Working capital	[]\$	. []\$
Other (specify): Consulting Services	[]\$	[X]\$ <u>97,000</u>
	[]\$	. []\$
Column Totals	[]\$	[X] \$ <u>97,000</u>
Total Payments Listed (column totals added)	[X] \$	97,000
D. FEDERAL SIGNATURE	-	
The issuer has duly caused this notice to be signed by the undersigned duly under Rule 505, the following signature constitutes an undertaking by the iss Exchange Commission, upon written request of its staff, the information furnis investor pursuant to paragraph (b)(2) of Rule 502.	uer to furnish to the hed by the issuer to	U.S. Securities and any non-accredited
Issuer (Print or Type) Signature		ate

Issuer (Print or Type)	Signature	Date
Prime Rate Investors, Inc.		June 13, 2002
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Carlos Fernandez	President	

ATTENTION: Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)